

## INMATE REQUEST FORM

INMATE NAME: 21001111111111111111 DATE: 2-28-08  
 INMATE NO: 21001111111111111111 PEN: 10000000000000000000 HOUSING UNIT: 40-3-33

## 1. CONTACT REQUEST: OUTSIDE AGENCY

☐ DISTRICT ATTORNEY ☐ PUBLIC DEFENDER ☐ ADULT PROBATION ☐ STATE PAROLE ☐ OTHER SPECIFY: \_\_\_\_\_

NATURE OF REQUEST: \_\_\_\_\_

## 2. CONTACT/INFORMATION: INSIDE FACILITY

CLASSIFICATION SECTION	INMATE SERVICE DIRECTOR	PROGRAMS DIRECTOR	ADMINISTRATIVE BOOKING	OTHER
<input type="checkbox"/> REHOUSING	<input type="checkbox"/> COMMISSARY	<input checked="" type="checkbox"/> LAW LIBRARY	<input type="checkbox"/> RELEASE DATE	<input type="checkbox"/> CHAPLAIN
<input type="checkbox"/> TRUSTEE	<input type="checkbox"/> MONEY ACCOUNT	<input type="checkbox"/> A.A.	<input type="checkbox"/> CHARGES	<input type="checkbox"/> FOOD SERVICE
<input type="checkbox"/> RECLASS.	<input type="checkbox"/> MAIL	<input type="checkbox"/> FRIENDS OUTSIDE	<input type="checkbox"/> BAIL	<input type="checkbox"/> BAIL BONDS
<input type="checkbox"/> WWP	<input type="checkbox"/> LOST PROPERTY	<input type="checkbox"/> OTHER SPECIFY BELOW	<input type="checkbox"/> NEXT COURT DATE	<input type="checkbox"/> OTHER SPECIFY BELOW
<input type="checkbox"/> PSP	<input type="checkbox"/> LOST CLOTHING	I NEED A MANILA ENVELOPE AND POSTAGE		

NATURE OF REQUEST: TO: CLERK, U.S. DISTRICT COURT, NORTHERN DISTRICT OF CALIFORNIA, 450 GOLDEN GATE AVENUE, SAN FRANCISCO, CALIF. 94102. DEADLINE IN 5 DAYS.

## 3. ACTION TAKEN/RESPONSE

☐ RESPONSE BELOW ☐ REQUEST FORWARDED OUTSIDE FACILITY ☐ REQUEST DENIED SEE EXPLANATION ☐ CANNOT BE ACTED ON AT THIS TIME.

☒ PREVIOUS REQUEST IN PROGRESS

EXPLANATION/RESPONSE: INCORRECT RESPONSE, THIS IS NOT A  
DEADLINE. NOT WAS 7. DEADLINE IT WAS 2.8.

DATE: 3/1/08 TIME: 2:29 PM BY: 0200



## INMATE REQUEST FORM

CONTINUED FROM PAGE 1 DATE 2-29-08

INMATE # 0203690 PINK # 00774 HOUSING UNIT YC 3-33

## 1. CONTACT REQUEST: OUTSIDE AGENCY

☐ DISTRICT ATTORNEY
 ☐ PUBLIC DEFENDER
 ☐ ADULT PROBATION
 ☐ STATE PAROLE
 ☐ OTHER SPECIFY: I GUESS

NATURE OF REQUEST: MY LAST REQUEST WAS STOPPED BY THE CHECK OF WRONG BOX. NO "PREVIOUS REQUEST IN PROGRESS" THIS

WAS DONE WITHOUT COMMUNICATING WITH ME IT WAS ALSO

DELAYED BY THE SAME RESPONDENT REQUEST 2-28-'08

## 2. CONTACT/INFORMATION: INSIDE FACILITY RESPONSE 2-29-'08

CLASSIFICATION SECTION	INMATE SERVICE DIRECTOR	PROGRAMS DIRECTOR	ADMINISTRATIVE BOOKING	OTHER
<input type="checkbox"/> REHOUSING	<input type="checkbox"/> COMMISSARY	<input checked="" type="checkbox"/> LAW LIBRARY	<input type="checkbox"/> RELEASE DATE	<input type="checkbox"/> CHAPLAIN
<input type="checkbox"/> TRUSTEE	<input type="checkbox"/> MONEY ACCOUNT	<input type="checkbox"/> A.A.	<input type="checkbox"/> CHARGES	<input type="checkbox"/> FOOD SERVICE
<input type="checkbox"/> RECLASS.	<input type="checkbox"/> MAIL	<input type="checkbox"/> FRIENDS OUTSIDE	<input type="checkbox"/> BAIL	<input type="checkbox"/> BAIL BONDS
<input type="checkbox"/> WWP	<input type="checkbox"/> LOST PROPERTY	<input type="checkbox"/> OTHER SPECIFY BELOW	<input type="checkbox"/> NEXT COURT DATE	<input type="checkbox"/> OTHER SPECIFY BELOW
<input type="checkbox"/> PSP	<input type="checkbox"/> LOST CLOTHING			

NATURE OF REQUEST: I NEED A MANILA ENVELOPE AND POSTAGE TO: CLERK U.S. DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA 450 GOLDEN GATE AVENUE SAN FRANCISCO, CALIF. 94102 DEADLINE...

## 3. ACTION TAKEN/RESPONSE

☐ RESPONSE BELOW
 ☒ REQUEST FORWARDED OUTSIDE FACILITY
 ☐ REQUEST DENIED SEE EXPLANATION
 ☐ CANNOT BE ACTED ON AT THIS TIME

☐ PREVIOUS REQUEST IN PROGRESS

INCORRECT RESPONSE,



CIVIL CASE No. C07-4251

## CIVIL INMATE REQUEST FORM

INMATE NAME: EDWARD GUTIERREZ

DATE

2-11-08

CEN: 06083690

PFN: BEJ774

HOUSING UNIT: 4C 3 39

## 1. CONTACT REQUEST: OUTSIDE AGENCY

☐DISTRICT  
ATTORNEY☐PUBLIC  
DEFENDER☐ADULT  
PROBATION☐STATE  
PAROLE☐OTHER  
SPECIFY: INMATE

NATURE OF REQUEST

RULE BOOK P. 11. YOU MAY REQUEST ADDITIONAL  
STAMPED ENVELOPES FOR LEGAL CORRESPONDENCE  
BY SENDING AN INMATE REQUEST FORM TO LAW LIBRARY COORDINATOR.

## 2. CONTACT/INFORMATION: INSIDE FACILITY

CLASSIFICATION  
SECTIONINMATE SERVICE  
DIRECTORPROGRAMS  
DIRECTORADMINISTRATIVE  
BOOKING

OTHER

☐

REHOUSING

☐

COMMISSARY

☒LAW  
LIBRARY☐RELEASE  
DATE☐

CHAPLAIN

☐

TRUSTEE

☐

MONEY ACCOUNT

☐

A.A.

☐

CHARGES

☐

FOOD SERVICE

☐

RECLASS.

☐

MAIL

☐FRIENDS  
OUTSIDE☐

BAIL

☐

BAIL BONDS

☐

WWP

☐

LOST PROPERTY

☐OTHER:  
SPECIFY  
BELOW☐NEXT COURT  
DATE☐OTHER:  
SPECIFY BELOW☐

PSP

☐

LOST CLOTHING

NATURE OF REQUEST:

I NEED POSTAGE FOR FOUR SEPERATE "LEGAL"  
LETTERS, 17 PAGES EACH. READY TO GO OUT, ASK  
AND ONE MANILA ENVELOPE PURSUANT TO ABOVE RULE.

## 3. ACTION TAKEN/RESPONSE

☒RESPONSE  
BELOW☐REQUEST FORWARDED  
OUTSIDE FACILITY☐REQUEST DENIED  
SEE EXPLANATION☐CANNOT BE ACTED  
ON AT THIS TIME.☐

PREVIOUS REQUEST IN PROGRESS

EXPLANATION/RESPONSE:

In order to receive legal indigent  
envelope, you must request on an Inmate Request form, with  
the name and address of the Court or Attorney  
you would like to correspond with and I will bring you  
OFFICER  
SIGNATURE: KB Shue Envelopes BADGE # 248 DATE 2/11/08 TIME 1/30

## INMATE REQUEST FORM

INMATE NAME: EDWARD GUTIERREZ DATE 2-18-08  
 CEN: 06083690 PFN: BGJ774 HOUSING UNIT: 4C-3-33

## 1. CONTACT REQUEST: OUTSIDE AGENCY

☐ DISTRICT ATTORNEY ☐ PUBLIC DEFENDER ☐ ADULT PROBATION ☐ STATE PAROLE ☐ OTHER SPECIFY: I DON'T

NATURE OF REQUEST: HAVE TIME FOR MORE DELAYS; SO, I WILL PUT THE FOLLOWING LEGAL ADDRESSES ON SEPERATE FORMS...

## 2. CONTACT/INFORMATION: INSIDE FACILITY

CLASSIFICATION SECTION	INMATE SERVICE DIRECTOR	PROGRAMS DIRECTOR	ADMINISTRATIVE BOOKING	OTHER
<input type="checkbox"/> REHOUSING	<input type="checkbox"/> COMMISSARY	<input checked="" type="checkbox"/> LAW LIBRARY	<input type="checkbox"/> RELEASE DATE	<input type="checkbox"/> CHAPLAIN
<input type="checkbox"/> TRUSTEE	<input type="checkbox"/> MONEY ACCOUNT	<input type="checkbox"/> A.A.	<input type="checkbox"/> CHARGES	<input type="checkbox"/> FOOD SERVICE
<input type="checkbox"/> RECLASS.	<input type="checkbox"/> MAIL	<input type="checkbox"/> FRIENDS OUTSIDE	<input type="checkbox"/> BAIL	<input type="checkbox"/> BAIL BONDS
<input type="checkbox"/> WWP	<input type="checkbox"/> LOST PROPERTY	<input type="checkbox"/> OTHER: SPECIFY BELOW	<input type="checkbox"/> NEXT COURT DATE	<input type="checkbox"/> OTHER: SPECIFY BELOW
<input type="checkbox"/> PSP	<input type="checkbox"/> LOST CLOTHING			

NATURE OF REQUEST: I NEED POSTAGE WITH TWO STAMPS "82¢" FOR 17 PAGES GOING TO: OFFICE OF THE CLERK, U.S. DISTRICT COURT, 450 GOLDEN GATE AVE. SAN FRANCISCO, CALIF. 94102. HONORABLE MAXINE CHESNEY.

## 3. ACTION TAKEN/RESPONSE

☒ RESPONSE BELOW ☐ REQUEST FORWARDED OUTSIDE FACILITY ☐ REQUEST DENIED SEE EXPLANATION ☐ CANNOT BE ACTED ON AT THIS TIME.

☐ PREVIOUS REQUEST IN PROGRESS

EXPLANATION/RESPONSE:

Request submitted 2/18/08. Envelope given 2/19/08. Submit RF when, envelope ready for pick up.

OFFICER SIGNATURE: R

BADGE # 2604 DATE 2/18/08 TIME 1100

**INMATE REQUEST FORM**

INMATE NAME: EDWARD GUTIERREZ DATE 2-19-08  
 CEN: 06083690 PFN: BGJ774 HOUSING UNIT: 4C-3-33

**1. CONTACT REQUEST: OUTSIDE AGENCY**

☐ DISTRICT ATTORNEY ☐ PUBLIC DEFENDER ☐ ADULT PROBATION ☐ STATE PAROLE ☐ OTHER SPECIFY: \_\_\_\_\_

NATURE OF REQUEST: \_\_\_\_\_

**2. CONTACT/INFORMATION: INSIDE FACILITY**

CLASSIFICATION SECTION	INMATE SERVICE DIRECTOR	PROGRAMS DIRECTOR	ADMINISTRATIVE BOOKING	OTHER
<input type="checkbox"/> REHOUSING	<input type="checkbox"/> COMMISSARY	<input checked="" type="checkbox"/> LAW LIBRARY	<input type="checkbox"/> RELEASE DATE	<input type="checkbox"/> CHAPLAIN
<input type="checkbox"/> TRUSTEE	<input type="checkbox"/> MONEY ACCOUNT	<input type="checkbox"/> A.A.	<input type="checkbox"/> CHARGES	<input type="checkbox"/> FOOD SERVICE
<input type="checkbox"/> RECLASS.	<input type="checkbox"/> MAIL	<input type="checkbox"/> FRIENDS OUTSIDE	<input type="checkbox"/> BAIL	<input type="checkbox"/> BAIL BONDS
<input type="checkbox"/> WWP	<input type="checkbox"/> LOST PROPERTY	<input type="checkbox"/> OTHER: SPECIFY BELOW	<input type="checkbox"/> NEXT COURT DATE	<input type="checkbox"/> OTHER: SPECIFY BELOW
<input type="checkbox"/> PSP	<input type="checkbox"/> LOST CLOTHING			

NATURE OF REQUEST: I HAVE FOUR LEGAL ENV-  
ELOPES READY FOR POSTAGE & MAIL...

**3. ACTION TAKEN/RESPONSE**

☒ RESPONSE BELOW ☐ REQUEST FORWARDED OUTSIDE FACILITY ☐ REQUEST DENIED SEE EXPLANATION ☐ CANNOT BE ACTED ON AT THIS TIME.

☐ PREVIOUS REQUEST IN PROGRESS

EXPLANATION/RESPONSE: Will Forward  
Picked up 2/20/08 [Signature]

OFFICER

SIGNATURE [Signature]

BADGE # 1117

DATE 2/19/08

TIME 2200



## INMATE REQUEST FORM

INMATE NAME: E. GUTIERREZ DATE 2-25-08  
 CEN: 06083690 PFN: BEJ774 HOUSING UNIT: #C-3 33

## 1. CONTACT REQUEST: OUTSIDE AGENCY

☐ DISTRICT ATTORNEY ☐ PUBLIC DEFENDER ☐ ADULT PROBATION ☐ STATE PAROLE ☐ OTHER SPECIFY: \_\_\_\_\_

NATURE OF REQUEST \_\_\_\_\_

## 2. CONTACT/INFORMATION: INSIDE FACILITY

CLASSIFICATION SECTION	INMATE SERVICE DIRECTOR	PROGRAMS DIRECTOR	ADMINISTRATIVE BOOKING	OTHER
<input type="checkbox"/> REHOUSING	<input type="checkbox"/> COMMISSARY	<input checked="" type="checkbox"/> LAW LIBRARY	<input type="checkbox"/> RELEASE DATE	<input type="checkbox"/> CHAPLAIN
<input type="checkbox"/> TRUSTEE	<input type="checkbox"/> MONEY ACCOUNT	<input type="checkbox"/> A.A.	<input type="checkbox"/> CHARGES	<input type="checkbox"/> FOOD SERVICE
<input type="checkbox"/> RECLASS.	<input type="checkbox"/> MAIL	<input type="checkbox"/> FRIENDS OUTSIDE	<input type="checkbox"/> BAIL	<input type="checkbox"/> BAIL BONDS
<input type="checkbox"/> WWP	<input type="checkbox"/> LOST PROPERTY	<input type="checkbox"/> OTHER: SPECIFY BELOW	<input type="checkbox"/> NEXT COURT DATE	<input type="checkbox"/> OTHER: SPECIFY BELOW
<input type="checkbox"/> PSP	<input type="checkbox"/> LOST CLOTHING	I NEED MANILA ENVELOPE & POSTAGE FOR LEGAL MAIL - VIA - SANTA CLARA CO.		

NATURE OF REQUEST: SHERIFF 55 W. YOUNGER ST. SAN JOSE, CA. 95110.

## 3. ACTION TAKEN/RESPONSE

☒ RESPONSE BELOW ☐ REQUEST FORWARDED OUTSIDE FACILITY ☐ REQUEST DENIED SEE EXPLANATION ☐ CANNOT BE ACTED ON AT THIS TIME.  
☐ PREVIOUS REQUEST IN PROGRESS

EXPLANATION/RESPONSE:

Envelope give 2-27-08. Please complete a Inmate Request form to have envelope mailed (to law library)

OFFICER SIGNATURE: C.O. Lyons

BADGE # 1762

DATE 2-25-08 TIME 2035

**INMATE REQUEST FORM**

INMATE NAME: E. GUTIERREZ DATE 2-27-08  
 CEN: 06083690 PFN: BGT774 HOUSING UNIT: 4C 3 33

**1. CONTACT REQUEST: OUTSIDE AGENCY**

☐ DISTRICT ATTORNEY ☐ PUBLIC DEFENDER ☐ ADULT PROBATION ☐ STATE PAROLE ☐ OTHER SPECIFY: \_\_\_\_\_

NATURE OF REQUEST: \_\_\_\_\_

**2. CONTACT/INFORMATION: INSIDE FACILITY**

CLASSIFICATION SECTION	INMATE SERVICE DIRECTOR	PROGRAMS DIRECTOR	ADMINISTRATIVE BOOKING	OTHER
<input type="checkbox"/> REHOUSING	<input type="checkbox"/> COMMISSARY	<input checked="" type="checkbox"/> LAW LIBRARY	<input type="checkbox"/> RELEASE DATE	<input type="checkbox"/> CHAPLAIN
<input type="checkbox"/> TRUSTEE	<input type="checkbox"/> MONEY ACCOUNT	<input type="checkbox"/> A.A.	<input type="checkbox"/> CHARGES	<input type="checkbox"/> FOOD SERVICE
<input type="checkbox"/> RECLASS.	<input type="checkbox"/> MAIL	<input type="checkbox"/> FRIENDS OUTSIDE	<input type="checkbox"/> BAIL	<input type="checkbox"/> BAIL BONDS
<input type="checkbox"/> WWP	<input type="checkbox"/> LOST PROPERTY	<input type="checkbox"/> OTHER: SPECIFY BELOW	<input type="checkbox"/> NEXT COURT DATE	<input type="checkbox"/> OTHER: SPECIFY BELOW
<input type="checkbox"/> PSP	<input type="checkbox"/> LOST CLOTHING			

NATURE OF REQUEST: I HAVE AN ENVELOPE READY FOR POSTAGE AND MAIL... CAN YOU PLEASE PICK IT UP?

**3. ACTION TAKEN/RESPONSE**

☐ RESPONSE BELOW ☐ REQUEST FORWARDED OUTSIDE FACILITY ☐ REQUEST DENIED SEE EXPLANATION ☐ CANNOT BE ACTED ON AT THIS TIME.  
☒ PREVIOUS REQUEST IN PROGRESS

EXPLANATION/RESPONSE: picked up 2/28/08

OFFICER SIGNATURE: SPAIN

BADGE # 2594 DATE 2-27-08 TIME 2:20



## INMATE REQUEST FORM

INMATE NAME: WILLIAM, GORDON DATE: 2-2-07  
 ID# 06082490 PTN BCT774 HOUSING UNIT 4B-7-0

## 1. CONTACT REQUEST: OUTSIDE AGENCY

☐ DISTRICT ATTORNEY ☐ PUBLIC DEFENDER ☐ ADULT PROBATION ☐ STATE PAROLE ☐ OTHER SPECIFY:

NATURE OF REQUEST:

## 2. CONTACT/INFORMATION: INSIDE FACILITY

CLASSIFICATION SECTION	INMATE SERVICE DIRECTOR	PROGRAMS DIRECTOR	ADMINISTRATIVE BOOKING	OTHER
<input type="checkbox"/> REHOUSING	<input type="checkbox"/> COMMISSARY	<input type="checkbox"/> LAW LIBRARY	<input type="checkbox"/> RELEASE DATE	<input type="checkbox"/> CHAPLAIN
<input type="checkbox"/> TRUSTEE	<input type="checkbox"/> MONEY ACCOUNT	<input type="checkbox"/> A.A.	<input type="checkbox"/> CHARGES	<input type="checkbox"/> FOOD SERVICE
<input type="checkbox"/> RECLASS.	<input type="checkbox"/> MAIL	<input type="checkbox"/> FRIENDS OUTSIDE	<input type="checkbox"/> BAIL	<input type="checkbox"/> BAIL BONDS
<input type="checkbox"/> WWP	<input type="checkbox"/> LOST PROPERTY	<input checked="" type="checkbox"/> OTHER SPECIFY BELOW	<input type="checkbox"/> NEXT COURT DATE	<input type="checkbox"/> OTHER SPECIFY BELOW
<input type="checkbox"/> PSP	<input type="checkbox"/> LOST CLOTHING			

NATURE OF REQUEST:

I WOULD LIKE TO USE THE PRO PER PHONE AT 12:00 NOON.

## 3. ACTION TAKEN/RESPONSE

☐ RESPONSE BELOW ☐ REQUEST FORWARDED OUTSIDE FACILITY ☐ REQUEST DENIED SEE EXPLANATION ☐ CANNOT BE ACTIONED ON AT THIS TIME

☐ PREVIOUS REQUEST IN PROGRESS

EXPLANATION/RESPONSE: We attempted to give Martinez use of the phone at 12:00 noon but he had nothing to say so we were unable to remove him from the phone.

He was told that he would be able to use the phone at 12:00 noon.

OFFICER SIGNATURE: W. J. Hall BADGE: 2412 DATE: 2-5-07 TIME: 1:00 PM



## INMATE REQUEST FORM

4C-3

INMATE NAME: EDWARD GUTIERREZDATE 12-11-08-088CEN: 06083690PFN: BGJ774HOUSING UNIT: 4B 3 3A 39

## 1. CONTACT REQUEST: OUTSIDE AGENCY

☐ DISTRICT ATTORNEY
 ☐ PUBLIC DEFENDER
 ☐ ADULT PROBATION
 ☐ STATE PAROLE
 ☐ OTHER SPECIFY: \_\_\_\_\_

NATURE OF REQUEST: \_\_\_\_\_

## 2. CONTACT/INFORMATION: INSIDE FACILITY

CLASSIFICATION SECTION	INMATE SERVICE DIRECTOR	PROGRAMS DIRECTOR	ADMINISTRATIVE BOOKING	OTHER
<input type="checkbox"/> REHOUSING	<input type="checkbox"/> COMMISSARY	<input type="checkbox"/> LAW LIBRARY	<input type="checkbox"/> RELEASE DATE	<input type="checkbox"/> CHAPLAIN
<input type="checkbox"/> TRUSTEE	<input type="checkbox"/> MONEY ACCOUNT	<input type="checkbox"/> A.A.	<input type="checkbox"/> CHARGES	<input type="checkbox"/> FOOD SERVICE
<input type="checkbox"/> RECLASS.	<input type="checkbox"/> MAIL	<input checked="" type="checkbox"/> FRIENDS OUTSIDE	<input type="checkbox"/> BAIL	<input type="checkbox"/> BAIL BONDS
<input type="checkbox"/> WWP	<input type="checkbox"/> LOST PROPERTY	<input type="checkbox"/> OTHER: SPECIFY BELOW	<input type="checkbox"/> NEXT COURT DATE	<input type="checkbox"/> OTHER: SPECIFY BELOW
<input type="checkbox"/> PSP	LOST CLOTHING I WOULD LIKE TO KNOW WHAT THE PROCEDURES ARE FOR FRIENDS OUTSIDE IN MAKING COPIES! THE COPIES I HAD MADE TODAY WERE SENT BACK TO ME			

NATURE OF REQUEST: BY SEVERAL DIFFERENT HANDS. MY COPIES WERE SITTING OUT ON THE TABLE WHILE THE NURSE WROTE ON HER PAPERS ON TOP OF THE ENVELOPE CONTAINING MY LEGAL COPIES. WHAT ARE THE PROCEDURES?

## 3. ACTION TAKEN/RESPONSE

☒ RESPONSE BELOW
 ☐ REQUEST FORWARDED OUTSIDE FACILITY
 ☐ REQUEST DENIED SEE EXPLANATION
 ☐ CANNOT BE CONTACTED ON AT THIS TIME.

☐ PREVIOUS REQUEST IN PROGRESS

EXPLANATION/RESPONSE:

If we are not able to return your copies personally the officer will give them to you. We do not hold pro per copies since they have been made for the inmate.

OFFICER

SIGNATURE: MoraBADGE # 2680 DATE 1/11/06 TIME 1240



Main Jail [ ]  
 Main Jail South [ ]  
 Main Jail North [ ]

SANTA CLARA COUNTY DEPARTMENT OF CORRECTION  
 INMATE COMPLAINT FORM

Elmwood [ ]  
 CCJ [ ]  
 MS [ ]

INMATE: EDUARDO GUTIERREZ INMATE NUMBER: 48-3-46

DESCRIPTION OF COMPLAINT: SINCE BE INMATE, I HAVE ATTEMPTED TO ORDER STAMPED ENVELOPES (INDIGNIT) FROM CANTEEN FOR TWO WEEKS AND HAVE NOT RECEIVED THEM... PLEASE LOOK INTO THIS MATTER OF CANTEEN REJECTION. TRY TO FIND OUT WHO IS RESPONSIBLE FOR THIS DISCRIMINATE TREATMENT. TRYING MY BEST TO ACCESS THE CANTEEN.

WHAT SOLUTION ARE YOU RECOMMENDING? PLEASE INVESTIGATE THIS ISSUE. I NEED ENVELOPES FOR LEGAL MAIL ON MY CASE.

Your Signature: [Signature] Date: 9/12/07 Time: 9:00 AM (PM)

Received from Inmate on: [Signature] (Do not write date or time. Use additional sheets if necessary)

Day: WED Date: 9/12/07 Time: 2:00 Officer: ROYES #2575 Team: D

RESPONDING OFFICER'S STATEMENT (Please print): YOU NEED TO FILL OUT THE INMATE COMMISSARY CONCERN FORM THAT I HAVE PROVIDED YOU WITH.

[ ] Resolved [ ] Refer to Level II

Officer's Name: ROYES #2575 Team: D Date: 9/12/07

SUPERVISOR'S ACTION:

[ ] Resolved [ ] Refer to Level III

Supervisor's Name: \_\_\_\_\_ Team: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

SHIFT LIEUTENANT REVIEW: [ ] Concur [ ] Reversed

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_

RECEIVED SERVICE RESPONSE: Unit Assigned: \_\_\_\_\_ Date Assigned: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Recd: \_\_\_\_/\_\_\_\_/\_\_\_\_

RECEIVED BY INMATE: Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_:\_\_\_\_

INMATE COMMENTS: [ ] Concur [ ] Reversed

DISTRIBUTION: Write Administration \_\_\_\_\_ Canteen Inmate (Final Disposal) \_\_\_\_\_ PMA Inmate (Initial Receipt) \_\_\_\_\_



Main Jail [ ] Santa Clara County Department of Correction  
Main Jail South [ ] Inmate Grievance Form  
Elmwood [ ]  
OCV [ ]  
MRE [ ]

RETALIATION FOR COMPLAINT  
EDWARD GUTIERREZ 01083690 40-3-39

DATE OF SALVANCE: NAME RE APPOINTED: ON 1-22-08 I WENT TO  
9:00 AM. PILL CALL. NURSE PAULA ADVISED ME THAT  
THERE WAS NO ORDER FOR BUPROPION. SHE ALSO  
STATED THAT THERE IS NO RECORD OF DISCON-  
TINUED MEDICATION. I HAVE BEEN TAKING BUPROPO  
FOR SIX TO 8 MONTHS. NURSE PAULA KNOWS ALOT ABOUT  
THE MEDICAL DEPARTMENT IF SHE SAYS THERE'S NO RECORD THEN THERE  
WHAT SOLUTION ARE YOU RECOMMENDING? PLEASE RETURN PINK COPY FOR COURT RECORDS.

Your Signature: [Signature] Date: 1/22/08 Time: 1:30 AM (PM)  
(Do not write below this line. Use additional sheets if necessary)

Received from Inmate on:  
Day: THU Date: 01/22/08 Time: 1540 Officer: JONES #1597 Team: A

RESPONDING OFFICER'S STATEMENT (Please print): CANNOT RESOLVE AT THIS LEVEL  
REFER TO MEDICAL

☐ Resolved ☒ Refer to Level II  
Supervisor's Name: \_\_\_\_\_ Team: \_\_\_\_\_ Date: \_\_\_\_\_  
SUPERVISOR'S ACTION: \_\_\_\_\_

☐ Resolved ☐ Refer to Level III  
Supervisor's Name: \_\_\_\_\_ Team: \_\_\_\_\_ Date: \_\_\_\_\_  
SHIFT LIEUTENANT REVIEW: ☐ Concur ☐ Reversed \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
SUPERVISOR'S RESPONSE: Unit Assigned: \_\_\_\_\_ Date Assigned: \_\_\_\_\_  
By: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
SHIFT LIEUTENANT REVIEW: ☐ Concur ☐ Reversed \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
By: \_\_\_\_\_  
Distribution: White-Administration    Green-Inmate (Final Disposition)    Pink-Inmate (Initial Receipt)



nd. TIME



ADULT CUSTODY HEALTH SERVICES  
WHITE CARD / CARTA BLANCA

Housing/Vivienda

4C-3-33 RETALIATION BY MEDICAL. 2-21-08

Request to see (Circle One):

Quiero ver a alguien en (Marque Uno):

Medical  
Servicios Medicos

Mental Health  
Servicios de Salud Mental

Dental  
Servicios Dental

PFN # BGJ774

Booking #/Numero del Registro de Admision 06083690

Name/Nombre

GUTIERREZ

EDWARD

Last Name (Apellido Paterno)

First (Nombre de Pila)

Middle (Segundo Nombre)

Date of Birth/Fecha de Nacimiento 10-23-59

Reason(s) for Request/Razon(es) de esta peticion: I HAVE BEEN TAKING BUPROPION FOR 6-8 MONTH. THE MEDICAL DEPT. KEEPS STOPPING THE

How Long Have You Had This Problem(s)? ¿Por cuanto tiempo ha tenido usted esta problema(s)? LONG AS 6-8 MO.

NOTE: GIVE THIS FORM ONLY TO A NURSE.

NOTICIA: SOLAMENTE DEBE ENTREGAR ESTE FORMULARIO A UNA ENFERMERA.

\*\*\*\*\*

DO NOT WRITE BELOW THIS LINE. NO ESCRIBA ABAJO DE ESTA LINA.

\*\*\*\*\*

DATE NURSE RECEIVED WHITE CARD FROM PATIENT: 2/21/08

NURSE'S INITIALS: u

ASSESSMENT:

2/25/08 note 1040

P ☐ The following medication(s) may help you and are available through the Commissary/  
La siguiente medicina(s) podria ayudarle y estan disponibles en la Comisaria:

☐ Physician will review your request / El doctor revisara su peticion

☐ MD Appointment Scheduled / Cita para ver al doctor (week of / la semana de)

☒ Psych MD Appointment Scheduled / Cita para ver al ciciatra (week of / la semana de) 3/6/08

☐ Dental Appointment Scheduled / Cita para ver al dentista (week of / la semana de)

☐ Mental Health will see you / Departamento de Salud Mental te van a ver

☐ No Sleep Medications are given at the Adult Custody Facilities / Et la Custodia de Adultos no dan medicina para dormir.

☐ Other Plan of Action / Comments / Otro Plan de Accion

THIS IS NOT UP TO MEDICAL DEPARTMENT. E.H.

See jail all nurse

☐ Patient Health Education Provided Explain:

☐ Medical Authorization Form completed

☐ Medical Wristband completed

☐ Standardized Procedure started; if yes, name(s) of Standardized Procedure(s) initiated:

DATE RESPONSE SENT TO PATIENT

RN SIGNATURE

DATE RESPONSE SENT TO

PATIENT WITH MD INFORMATION

RN SIGNATURE

Distribution: White-Medical Record

Pink-Inmate (Initial Receipt)

Yellow-Response to Inmate

Goldenrod-MD Response to Patient



3RD TIME



ADULT CUSTODY HEALTH SERVICES  
WHITE CARD / CARTA BLANCA

Housing/Vivienda

Date/Fecha

2-25-08

Request to see (Circle One):

Quiero ver a alguien en (Marque Uno):

Medical  
Servicios Medicos

Mental Health

Servicios de Salud Mental

Dental

Servicios Dental

PFN #

BG0774

Booking #/Numero del Registro de Admision

06083690

Name/Nombre

GUTIERREZ

EDWARD

Last Name (Apellido Paterno)

First (Nombre de Pila)

Middle (Segundo Nombre)

Date of Birth/Fecha de Nacimiento

10-23-59

Reason(s) for Request/Razon(es) de esta peticion:

BUPROPION WAS DISCONTINUED  
AFTER APPROX. 8 MONTHS 'OUT OF NOWHERE'

How Long Have You Had This Problem(s)? ¿Por cuanto tiempo has tenido usted esta problema(s)?

V CHRT.

NOTE: GIVE THIS FORM ONLY TO A NURSE.

NOTICIA: SOLAMENTE DEBE ENTREGAR ESTE FORMULARIO A UNA ENFERMERA.

\*\*\*\*\*

DO NOT WRITE BELOW THIS LINE. NO ESCRIBA ABAJO DE ESTA LINA.

\*\*\*\*\*

DATE NURSE RECEIVED WHITE CARD FROM PATIENT:

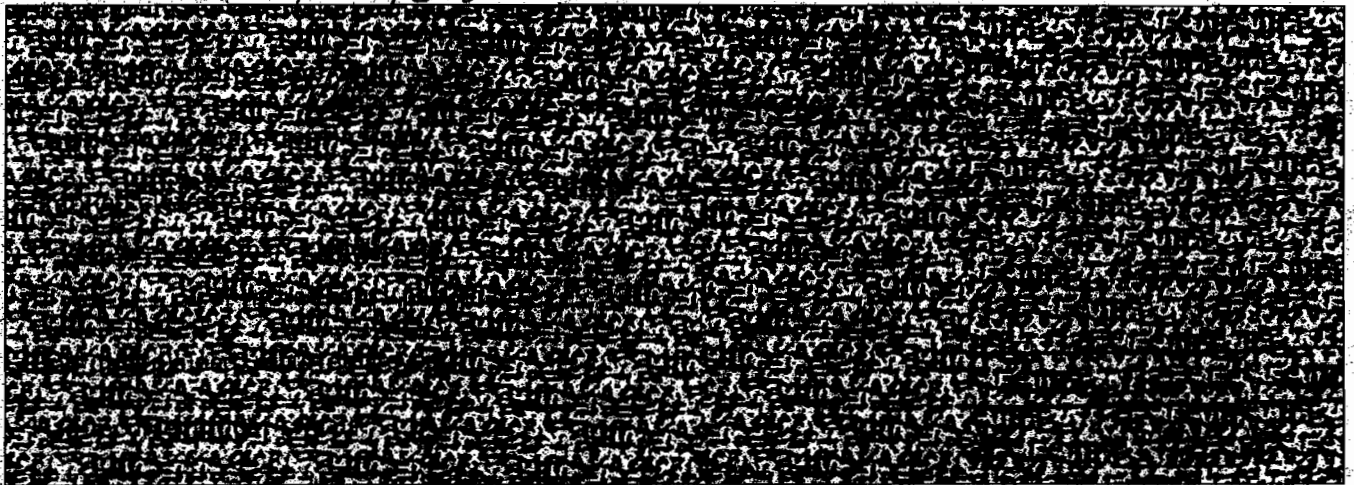
2-25-08

NURSE'S INITIALS:

PS

ASSESSMENT:

2/25/08



P ☐ The following medication(s) may help you and are available through the Commissary/  
La siguiente medicina(s) podria ayudarle y estan disponibles en la Comisaria:

☐ Physician will review your request / El doctor revisara su peticion

☒ MD appointment Scheduled / Cita para ver al doctor (week of / la semana de)

☐ Psych MD Appointment Scheduled / Cita para ver al ciciatra (week of / la semana de)

☐ Dental Appointment Scheduled / Cita para ver al dentista (week of / la semana de)

☐ Mental Health will see you / Departamento de Salud Mental te van a ver

☐ No Sleep Medications are given at the Adult Custody Facilities / El la Custodia de Adultos no dan medicina para dormir.

☐ Other Plan of Action / Comments / Otro Plan de Accion

THIS IS NOT UP TO MEDICAL DEPARTMENT. E.H.

See nurse call nurse

☐ Patient Health Education Provided Explain:

☐ Medical Authorization Form completed

☐ Medical Wristband completed

☐ Standardized Procedure started; if yes, name(s) of Standardized Procedure(s) initiated:

DATE RESPONSE SENT TO PATIENT

DATE RESPONSE SENT TO

PATIENT WITH MD INFORMATION

RN SIGNATURE

RN SIGNATURE



EXAMPLE OF DIFFICULTIES IN LEGAL RESEARCH...

COUNTY OF SANTA CLARA  
DEPARTMENT OF CORRECTION

Captain D. Sepulveda  
Main Jail Complex Commander  
150 West Hedding Street  
San Jose, CA 95110  
Phone: (408) 808-2800  
Fax: (408) 971-3358

4B

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MEMORANDUM

Edward Flores, Chief of Correction

To: Edward Gutierrez  
BK#06083690 MJN 4B

Date: January 17, 2008

From: Main Jail Administration

Subject: Legal Research Request

I am in receipt of the LRA form you submitted. LRA forms are to be used in order to get legal information/material.

I am unable to process your request because:

\_\_\_\_\_ LRA does NOT provide inmates with address. Request addresses from Friends Outside.

\_\_\_\_\_ You wrote outside of the Margins or attached a page.

\_\_\_\_\_ LRA can not give you physical access to the Pro Per Lab (formerly the Law Library).

\_\_\_\_\_ LRA does not provide writing material including stamps to inmates.

\_\_\_\_\_ You may ONLY request 5 items on each LRA form you complete.

✓ \_\_\_\_\_ You have previously used this form, please complete a "new" form, if you need more information.

\_\_\_\_\_ LRA can NOT provide you with specific information regarding your case/s and/or give you case #'s, Discovery packets, transcripts etc.

\_\_\_\_\_ Other: \_\_\_\_\_

Thank you,  
M: MJProg/LRA/return LRAform  
07/07/06 . ag



EXAMPLE

SANTA CLARA COUNTY

LEGAL RESEARCH ASSOCIATES - RESPONSE TO INMATE GRIEVANCE

**Inmate:** Edward Gutierrez

**Booking #:** 06083690

**Grievance No.** 70377

**Grievance Date:** August 7, 2007

**Grievance(s) Received by LRA:** August 15, 2007

**Grievance(s) Response Date:** August 15, 2007

**Response:**

Mr. Gutierrez complains that LRA did not send him 4 copies of our federal civil rights complaint packet that includes both forms and filing information. He is correct. LRA will send only one copy of any requested packet. If an inmate requires additional copies of the forms she/he must have the copies made at the jail prior to filling them out. Included in each of our packets that include forms there is a Memo advising the inmate to have blank forms copied before filling them out.

Please contact me if any additional information is required.

Respectfully submitted,



Richard L. Williams, LRA



EXAMPLE

**MEMO FROM LEGAL RESEARCH ASSOCIATES**

**SANTA CLARA COUNTY**

You have requested more than 5 items on this Request Form.

Pursuant to a change in Department of Correction Policy, LRA will only provide the **first 5 items** requested on any Request Form. We have provided these to you.

To obtain the additional items, please complete a separate Request Form for each 5 items you want to receive.

LRA



# EXAMPLE

## MEMO FROM LEGAL RESEARCH ASSOCIATES (LRA) SANTA CLARA COUNTY SECONDARY SOURCES

You have requested information from a secondary source that is no longer in print, is not readily available to LRA, is not related to a criminal or civil action, or is not legal in nature.

As a general rule, we do not supply secondary legal materials that are not readily available in our law library. Such materials include, but are not limited to, the following:

- Board of Prison Terms (BPT) or California Department of Corrections (CDC) D.O.M. (Department Operations Manual);
- California Digest of Official Reports;
- CDC violation codes/section numbers;
- drug/alcohol programs;
- electoral or legislative histories of bills and/or statutes;
- historical documents (such as the Declaration of Independence, Lincoln's Emancipation Proclamation, the Magna Carta, etc.);
- information on rules, policies, and procedures of specific prisons or jails;
- inmate records such as arrest records, "rap sheets", booking and/or release records, docket and/or case numbers, court transcripts or records, discovery materials (contact your attorney about obtaining copies of your current case materials);
- judges benchbooks;
- law review articles and/or publications;
- legal reference materials published in languages other than English;
- newspaper or magazine articles or clippings;
- out-of-state/country statutes, codes, or constitutions;
- police reports;
- restatements of law;
- Santa Clara County Dept. of Corrections and/or jail policies & procedures (P. & P. must be obtained directly from the Department or jail staff);
- C.J.S.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

If you repeat your request(s) by specifying the topic(s) you're interested in, we may be able to supply you with information from an alternate source that *is* available to us. Primary materials not readily available, such as federal regulations, early U.S. Supreme Court and California cases, and non-California cases will be supplied as time permits.



EXAMPLE

**MEMO FROM LEGAL RESEARCH ASSOCIATES (LRA)**

RE: 1 J. Bishop, Criminal Procedure §§87

The above requested item(s) exceeds the scope of LRA's agreement with your incarcerating facility and will not be provided.



EXAMPLE

## MEMO FROM LEGAL RESEARCH ASSOCIATES (LRA)

### **RE: Duplicate LRA Request(s)**

You have submitted a request to LRA for the following forms, informational packets, and/or other legal resource materials that you have previously received within the last month:

### **Key Digest 230k34(6)**

Please be aware that LRA is not a copy service for inmates. LRA does not provide inmates with multiple copies of cases, statutes, regulations, or informational packets.

If you need duplicate copies of any forms sent by LRA, you should submit those materials to whatever office or organization within your jail that provides copy services. Ask your housing staff for more information. Most jail copy facilities will not make copies of blank forms; all forms sent for copying should at least include both the inmate's printed name and signature (in the appropriate spaces on the forms), and a case number if the court has already assigned one.

If there are special circumstances why you need to obtain the above-mentioned duplicate materials from LRA, instead of submitting a request within your jail for copies, please specify those circumstances by submitting another LRA request form.




# EXAMPLE

## MEMO FROM LEGAL RESEARCH ASSOCIATES (LRA) SANTA CLARA COUNTY SECONDARY SOURCES

You have requested information from a secondary source that is no longer in print, is not readily available to LRA, is not related to a criminal or civil action, or is not legal in nature.

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  - California Digest of Official Reports;
  - CDC violation codes/section numbers;
  - drug/alcohol programs;
  - electoral or legislative histories of bills and/or statutes;
  - historical documents (such as the Declaration of Independence, Lincoln's Emancipation Proclamation, the Magna Carta, etc.);
  - information on rules, policies, and procedures of specific prisons or jails;
  - inmate records such as arrest records, "rap sheets", booking and/or release records, docket and/or case numbers, court transcripts or records, discovery materials (contact your attorney about obtaining copies of your current case materials);
  - judges benchbooks;
  -  law review articles and/or publications;
  - legal reference materials published in languages other than English;
  - newspaper or magazine articles or clippings;
  - out-of-state/country statutes, codes, or constitutions;
  - police reports;
  - restatements of law;
  - Santa Clara County Dept. of Corrections and/or jail policies & procedures (P. & P. must be obtained directly from the Department or jail staff);
  - C.J.S.
  -
- 
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EXAMPLE

**MEMO FROM LEGAL RESEARCH ASSOCIATES (LRA)**

**INCORRECT OR INCOMPLETE REFERENCE**

YOUR REQUEST(S) FOR LEGAL ASSISTANCE, NUMBERED 411507-3949 INCLUDES ~~INCOMPLETE OR INCORRECT~~ REFERENCES/~~CITATIONS~~ TO A CASE, STATUTE, TOPIC, OR ARTICLE. PLEASE CHECK YOUR SOURCES AND, IF STILL DESIRED, SUBMIT A NEW REQUEST SLIP.

SPECIFICALLY: Pr. Sandoval 8148917  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:**

ALL REQUESTS FOR CASES SHOULD INCLUDE AS MANY OF THE FOLLOWING AS POSSIBLE: ~~FULL CASE NAME ("PEOPLE V. SMITH"; NOT JUST "SMITH")~~; YEAR OF THE CASE; ~~FULL CASE CITATION (EXAMPLE: PEOPLE V. SMITH (1989) 43 CAL.3D 152)~~. IF YOU DO NOT KNOW THE YEAR OR CITATION, PLEASE INDICATE BRIEFLY THE TOPIC OF THE REQUESTED CASE.

ALL REQUESTS FOR STATUTES **MUST** INCLUDE THE NAME (OR ABBREVIATION) OF THE CODE FOR STATE STATUTES (EXAMPLE: PENAL CODE (P.C.), VEHICLE CODE (V.C.), ETC.) OR THE TITLE & SECTION NUMBERS FOR U.S. CODE STATUTES (EXAMPLES: 18 USC §2001; 21 USC §941; 42 USC §1983).

ALL REQUESTS FOR CHAPTERS AND/OR SECTIONS FROM REFERENCE BOOKS OR VOLUMES SHOULD INCLUDE THE NAME OF THE REFERENCE WORK.



## EXAMPLE

### MEMO FROM LEGAL RESEARCH ASSOCIATES (LRA) SANTA CLARA COUNTY SECONDARY SOURCES

You have requested information from a secondary source that is no longer in print, is not readily available to LRA, is not related to a criminal or civil action, or is not legal in nature.

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- police reports;
- restatements of law;
- Santa Clara County Dept. of Corrections and/or jail policies & procedures (P. & P. must be obtained directly from the Department or jail staff);

→ C.J.S.

→ *Freedman & Hollander Supp. of Indictments*

→ *Marcus - Prosecution of Crim. Conspiracy cases -*  
*CRIM LAW 1497*

If you repeat your request(s) by specifying the topic(s) you're interested in, we may be able to supply you with information from an alternate source that is available to us. Primary materials not readily available, such as federal regulations, early U.S. Supreme Court and California cases, and non-California cases will be supplied as time permits.



# EXAMPLE

## MEMO FROM LEGAL RESEARCH ASSOCIATES (LRA)

### INCORRECT OR INCOMPLETE REFERENCE

YOUR REQUEST(S) FOR LEGAL ASSISTANCE, NUMBERED MJD17-4103 INCLUDES INCOMPLETE OR ~~INCORRECT~~ REFERENCES/CITATIONS TO A CASE, STATUTE, TOPIC, OR ARTICLE. PLEASE CHECK YOUR SOURCES AND, IF STILL DESIRED, SUBMIT A NEW REQUEST SLIP.

SPECIFICALLY: Penal Code 757, 1385.5  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### **NOTE:**

ALL REQUESTS FOR CASES SHOULD INCLUDE AS MANY OF THE FOLLOWING AS POSSIBLE: FULL CASE NAME ("PEOPLE V SMITH"; NOT JUST "SMITH"); YEAR OF THE CASE; FULL CASE CITATION (EXAMPLE: PEOPLE V. SMITH (1989) 43 CAL.3D 152). IF YOU DO NOT KNOW THE YEAR OR CITATION, PLEASE INDICATE BRIEFLY THE TOPIC OF THE REQUESTED CASE.

ALL REQUESTS FOR STATUTES **MUST** INCLUDE THE NAME (OR ABBREVIATION) OF THE CODE FOR STATE STATUTES (EXAMPLE: PENAL CODE (P.C.), VEHICLE CODE (V.C.), ETC.) OR THE TITLE & SECTION NUMBERS FOR U.S. CODE STATUTES (EXAMPLES: 18 USC §2001; 21 USC §941; 42 USC §1983).

ALL REQUESTS FOR CHAPTERS AND/OR SECTIONS FROM REFERENCE BOOKS OR VOLUMES SHOULD INCLUDE THE NAME OF THE REFERENCE WORK.



EXAMPLE

**MEMO FROM LEGAL RESEARCH ASSOCIATES (LRA)**

**INCORRECT OR INCOMPLETE REFERENCE**

YOUR REQUEST(S) FOR LEGAL ASSISTANCE, NUMBERED MS07-4101 INCLUDES INCOMPLETE OR INCORRECT REFERENCES/CITATIONS TO A CASE, STATUTE, TOPIC, OR ARTICLE. PLEASE CHECK YOUR SOURCES AND, IF STILL DESIRED, SUBMIT A NEW REQUEST SLIP.

SPECIFICALLY: Pv Superior Ct. Supra 14CA 4th 918

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**NOTE:**

ALL REQUESTS FOR CASES SHOULD INCLUDE AS MANY OF THE FOLLOWING AS POSSIBLE: FULL CASE NAME ("PEOPLE V SMITH"; NOT JUST "SMITH"); YEAR OF THE CASE; FULL CASE CITATION (EXAMPLE: PEOPLE V. SMITH (1989) 43 CAL.3D 152). IF YOU DO NOT KNOW THE YEAR OR CITATION, PLEASE INDICATE BRIEFLY THE TOPIC OF THE REQUESTED CASE.

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ALL REQUESTS FOR CHAPTERS AND/OR SECTIONS FROM REFERENCE BOOKS OR VOLUMES SHOULD INCLUDE THE NAME OF THE REFERENCE WORK.



EXAMPLE

**MEMO FROM LEGAL RESEARCH ASSOCIATES (LRA)**

**INCORRECT OR INCOMPLETE REFERENCE**

YOUR REQUEST(S) FOR LEGAL ASSISTANCE, NUMBERED  
MJ07-4190 INCLUDES INCOMPLETE OR [REDACTED]  
REFERENCES/[REDACTED] TO A CASE, STATUTE, TOPIC, OR  
ARTICLE. PLEASE CHECK YOUR SOURCES AND, IF STILL  
DESIRED, SUBMIT A NEW REQUEST SLIP.

SPECIFICALLY: People vs Superior Ct. Supra 14CA 411968

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**NOTE:**

ALL REQUESTS FOR CASES SHOULD INCLUDE AS MANY OF THE  
FOLLOWING AS POSSIBLE: FULL CASE NAME ("PEOPLE V  
SMITH"; NOT JUST "SMITH"); [REDACTED] FULL CASE  
CITATION (EXAMPLE: PEOPLE V. SMITH (1989) 43 CAL.3D 152). IF  
YOU DO NOT KNOW THE YEAR OR CITATION, PLEASE INDICATE  
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REFERENCE BOOKS OR VOLUMES SHOULD INCLUDE THE NAME  
OF THE REFERENCE WORK.

EXAMPLE

**MEMO FROM LEGAL RESEARCH ASSOCIATES (LRA)**

**INCORRECT OR INCOMPLETE REFERENCE**

YOUR REQUEST(S) FOR LEGAL ASSISTANCE, NUMBERED MS07-4102 INCLUDES ~~INCOMPLETE~~ OR INCORRECT REFERENCES/CITATIONS TO A CASE, STATUTE, TOPIC, OR ARTICLE. PLEASE CHECK YOUR SOURCES AND, IF STILL DESIRED, SUBMIT A NEW REQUEST SLIP.

SPECIFICALLY: Caljur 3d Criminal Law: (Rest of Chapter name) § 605  
AMJUR 2ND (Chapter name) 279 § 29

**NOTE:**

ALL REQUESTS FOR CASES SHOULD INCLUDE AS MANY OF THE FOLLOWING AS POSSIBLE: FULL CASE NAME ("PEOPLE V SMITH"; NOT JUST "SMITH"); YEAR OF THE CASE; FULL CASE CITATION (EXAMPLE: PEOPLE V. SMITH (1989) 43 CAL.3D 152). IF YOU DO NOT KNOW THE YEAR OR CITATION, PLEASE INDICATE BRIEFLY THE TOPIC OF THE REQUESTED CASE.

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*EXAMPLE.*

**MEMO FROM LEGAL RESEARCH ASSOCIATES**

**SANTA CLARA COUNTY**

You have requested more than 5 items on this Request Form.

Pursuant to a change in Department of Correction Policy, LRA will only provide the **first 5 items** requested on any Request Form. We have provided these to you.

To obtain the additional items, please complete a separate Request Form for each 5 items you want to receive.

LRA

# INMATE REQUEST FORM

INMATE NAME: EDWARD GUTIERREZ

DATE 1-10-08

CEN: 06083670

PTN: B65774

HOUSING UNIT: 4B 3 34

## 1. CONTACT REQUEST: OUTSIDE AGENCY

☐ DISTRICT ATTORNEY ☐ PUBLIC DEFENDER ☐ ADULT PROBATION ☐ STATE PAROLE ☐ OTHER SPECIFY: \_\_\_\_\_

NATURE OF REQUEST: \_\_\_\_\_

## 2. CONTACT/INFORMATION: INSIDE FACILITY

CLASSIFICATION SECTION	INMATE SERVICE DIRECTOR	PROGRAMS DIRECTOR	ADMINISTRATIVE BOOKING	OTHER
<input type="checkbox"/> REHOUSING	<input type="checkbox"/> COMMISSARY	<input type="checkbox"/> LAW LIBRARY	<input type="checkbox"/> RELEASE DATE	<input type="checkbox"/> CHAPLAIN
<input type="checkbox"/> TRUSTEE	<input type="checkbox"/> MONEY ACCOUNT	<input type="checkbox"/> A.A.	<input type="checkbox"/> CHARGES	<input type="checkbox"/> FOOD SERVICE
<input type="checkbox"/> RECLASS.	<input type="checkbox"/> MAIL	<input checked="" type="checkbox"/> FRIENDS OUTSIDE	<input type="checkbox"/> BAIL	<input type="checkbox"/> BAIL BONDS
<input type="checkbox"/> WWP	<input type="checkbox"/> LOST PROPERTY	<input type="checkbox"/> OTHER: SPECIFY BELOW	<input type="checkbox"/> NEXT COURT DATE	<input type="checkbox"/> OTHER: SPECIFY BELOW
<input type="checkbox"/> PSP	<p>LOST CLOTHING I WOULD LIKE TO KNOW WHAT THE PROCEDURES ARE FOR FRIENDS OUTSIDE IN MAKING COPIES? THE COPIES I HAD MADE TODAY WERE SENT BACK TO ME BY SEVERAL DIFFERENT HANDS. MY COPIES WERE SITTING OUT ON THE TABLE WHILE THE NURSE WROTE ON HER PAPERS ON TOP OF THE ENVELOPE CONTAINING MY LEGAL COPIES. WHAT ARE THE PROCEDURES?</p>			

NATURE OF REQUEST: \_\_\_\_\_

## 3. ACTION TAKEN/RESPONSE

☐ RESPONSE BELOW ☐ REQUEST FORWARDED OUTSIDE FACILITY ☒ REQUEST DENIED SEE EXPLANATION ☐ CANNOT BE ACTED ON AT THIS TIME.

☐ PREVIOUS REQUEST IN PROGRESS

EXPLANATION/RESPONSE: \_\_\_\_\_

SIGNATURE: [Signature]

BADGE # 2180

DATE 1/10/08

TIME 1240



Edward Gutierrez  
06083690 BGJ774  
885 North San Pedro  
San Jose, CA 95110

*CASE NO. 07-4251 MMC (PR).*

Clerk, US District Court  
Northern District of California  
450 Golden Gate Ave.  
San Francisco, CA 94102

